

Auto-Enrollment and Facilitated Enrollment of Low-Income Populations

CMS will auto-enroll or facilitate enrollment for all those who are eligible for a low-income subsidy (LIS). Auto-enrollment is the process for full-benefit dual eligibles; facilitated enrollment is the process for others eligible for LIS. The processes are essentially the same, but the timing of the first round for each differs.

	Auto-Enrolling Full-Benefit Dual Eligibles	Facilitating Enrollment for Other Low-Income Subsidy Eligibles
Who will be enrolled?	<p>Full-benefit dual eligibles:</p> <ul style="list-style-type: none"> • Comprehensive Medicaid benefits • Some Medicare Savings Programs: <ul style="list-style-type: none"> ➤ QMB-plus (full Medicaid plus payment for Medicare premiums, coinsurance, and deductibles) ➤ SLMB-plus (full Medicaid plus payment for Medicare Part B premium) 	<p>Others eligible for low-income subsidy (LIS):</p> <ul style="list-style-type: none"> • Some Medicare Savings Programs: <ul style="list-style-type: none"> ➤ QMB-only (no Medicaid; only payment for Medicare premiums, coinsurance, and deductibles) ➤ SLMB-only (no Medicaid; only payment for Medicare Part B premium) ➤ QI-1 • SSI-only (Medicare and SSI, but no Medicaid) • Those who apply at SSA or State and are determined eligible for low-income subsidy
When will it start?	<p>Auto-enrollment of full-benefit dual eligibles will start in the fall of 2005. These beneficiaries lose Medicaid prescription drug coverage 12/31/05, so auto-enrollment must be started in time to be effective 1/1/06.</p>	<p>Facilitated enrollment of others eligible for LIS will start in spring of 2006. This population is not eligible for, and therefore not losing, Medicaid prescription drug coverage. To give this population time to choose a plan that meets their needs and enroll on their own, we will wait until near the end of the Initial Enrollment Period</p>

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		(which ends 5/15/06) to facilitate their enrollment.
How will it work for the initial round?	<p>First round in 2005:</p> <p><u>August</u> - CMS will identify the initial pool of existing full-benefit dual eligibles (based on state data submitted the end of July)</p> <p><u>Mid-September</u> – CMS finalizes contracts with Part D plans</p> <p><u>Mid- September</u> – CMS creates auto-enrollment transactions with effective date of 1/1/06 (to ensure no coverage gap after Medicaid ends 12/31/05). If the beneficiary chooses another plan before the auto-enrollment effective date, the beneficiary’s choice will prevail.</p> <p><u>Late October</u> – CMS notifies beneficiaries, plans, and state Medicaid agencies of plans into which beneficiary will be auto-enrolled if they do not choose on their own</p> <p><u>December 31</u> -- Last chance for beneficiary to choose another plan before auto-enrollment takes effect</p> <p><u>January 1, 2006</u> – Auto-enrollment takes effect (if person has not chosen another plan). Full-benefit dual eligibles may still change plans at any time after auto-enrollment is effective.</p>	<p>First round in 2006 (estimated dates):</p> <p><u>Early April</u> - CMS will identify the initial pool of other LIS eligibles who have not enrolled in a plan</p> <p><u>Early April</u> – CMS creates facilitated enrollment transactions with effective date of 6/1/06. If the beneficiary chooses another plan before the facilitated enrollment effective date, the beneficiary’s choice will prevail.</p> <p><u>Late April</u> – CMS notifies beneficiaries, plans, and state Medicaid agencies of plans into which beneficiary will be facilitated enrolled if they do not choose on their own</p> <p><u>May 15</u> -- Last chance for beneficiary to choose another plan before facilitated enrollment takes effect</p> <p><u>June 1, 2006</u> – Facilitated enrollment takes effect (if person has not chosen another plan). Beneficiaries will have one additional opportunity to change plans.</p>
What plans will beneficiaries be	Plan into which beneficiary will be auto-enrolled or facilitated enrolled is based on where person currently gets Parts A and B benefits, and whether the Part D premium is at or below the low-income premium subsidy amount.	

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enrolled into?	<p>PACE enrollees automatically get their Part D benefits through their PACE organization, so no auto-or facilitated enrollment is necessary.</p> <p>MA plan → MA-PD in same MA organization with the lowest Part D premium MA-Private Fee-for-Service (PFFS) with Part D → Same PFFS for Part D Cost plan with Part D optional supplemental benefit → Same cost plan for Part D Original Medicare → PDP* PFFS with no Part D → PDP* Cost plan with no Part D → PDP* MSA → PDP*</p> <p>* If there is more than one PDP with Part D premium at or below low-income premium subsidy amount, beneficiaries will be auto-enrolled on random basis among available plans.</p>	
What will beneficiary notice say?	<p>Letter will tell them:</p> <ul style="list-style-type: none"> • How to choose a Part D plan • Reminds them Medicaid ends 12/31/05 • Reminds them they have the low-income subsidy • If they don't choose a plan by 12/31/05, they will be auto-enrolled with Plan "ABC" (will provide plan's member services number and website) • Reminds them they can change plans at anytime • That they can affirmatively decline Part D altogether 	<p>Letter will tell them:</p> <ul style="list-style-type: none"> • How to choose a Part D plan • Reminds them they have the low-income subsidy • If they don't choose a plan by 5/15/06, they will be facilitated enrolled with Plan "ABC" (will provide plan's member services number and website) • Reminds them they have one Special Enrollment period to change if they don't like plan into which enrollment was facilitated • That they can affirmatively decline Part D altogether

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	<ul style="list-style-type: none"> • Directs them to call 1-800-MEDICARE for questions. 	<ul style="list-style-type: none"> • Directs them to call 1-800-MEDICARE for questions.
How often can the beneficiary change plans?	Full-benefit dual eligibles have a permanent Special Enrollment Period granted by statute. As long as the beneficiary remains a full-benefit dual eligible, the beneficiary can change Part D plans at anytime.	Other LIS eligibles who have their enrollment facilitated will have one Special Enrollment Period, which we will authorize in operational guidance. This means they have one chance to change after facilitated enrollment (outside of the normal opportunities in which any beneficiary can change plans).
When will the on-going monthly process start for new beneficiaries?	Estimated to be October 2005, and monthly thereafter.	Estimated to be June, 2006, and monthly thereafter.